# BAY AREA RAPID TRANSIT DISTRICT

# RETURN TO WORK FROM LEAVE OF ABSENCE

**Instructions:** As the supervisor, or designee, please complete and submit this document within two business days for any employee returning to work from a Personal, Education, Military or Emergency Leave of Absence to ensure the employee status is changed to active. Please send this document to BART Human Resource Information Systems (HRIS) at the address below, or fax it to 510.464.6254.

**I        Employee Information – Please indicate the name of the employee on leave.**

Employee Name: _____        Employee Identification Number: _____

**II       Return To Work Information**

Did the employee return to work:        ☐ Yes        ☐ No   (Please sign below and proceed to Section III)

Employee Returned To Work On: _____

**Supervisor must obtain a Security Request Form and send it to BART HRIS along with this document.**

| | | |
|---|---|---|
| **Supervisor / Designee Signature** | **Date Signed** | **Date Sent** |

**III      Employee Did Not Return To Work:**

Please contact Labor Relations at 510.287.4728 to discuss disciplinary actions, if any.

**IV      Action / Reason Code Section – To be completed by HRIS**

☐   Data Change – RFL[1]: _____        ☐   Return From Leave – RFL[2]: _____

| | | |
|---|---|---|
| **HRIS Signature** | **Date Received** | **Date Entered** |

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[1] To be used when an employee returns from leave while on paid status.
[2] To be used when an employee returns from leave while on unpaid status.

**Mailing Address:  BART HRIS, 300 Lakeside Drive, 20th Floor, Oakland CA  94612**

**V       Additional Pay Adjustments – To be completed by Payroll once the employee returns to work**

| Additional Pay Type | Begin Date | Additional Pay Type | Begin Date |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

| | | |
|---|---|---|
| **Payroll Signature** | **Date Received** | **Date Entered** |

**VI       Maintain Time Reporter – To be completed by Time and Labor**

☐      **Clear Rule Element 4**

| | | |
|---|---|---|
| **TA Group Signature** | **Date Received** | **Date Entered** |

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